

DECLARATION AND POWER OF ATTORNEY

As a below named inventor, I declare that:

My residence, post office address and citizenship are as stated below next to my name; I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural inventors are named below) of the subject matter which is claimed and for which a patent is sought on the invention entitled: **SYSTEMS AND METHODS FOR ELECTROSURGICAL DISSECTION AND HARVESTING OF TISSUE** the specification of which X is attached hereto or ___ was filed on _____ as Application No. _____ and was amended on ___ (if applicable).

I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment referred to above. I acknowledge the duty to disclose information which is material to the examination of this application in accordance with Title 37, Code of Federal Regulations, Section 1.56. I claim foreign priority benefits under Title 35, United States Code, Section 119 of any foreign application(s) for patent or inventor's certificate listed below and have also identified below any foreign application for patent or inventor's certificate having a filing date before that of the application on which priority is claimed.

Prior Foreign Application(s)

Country	Application No.	Date of Filing	Priority Claimed Under 35 USC 119
			Yes ___ No ___

I hereby claim the benefit under Title 35, United States Code §119(e) of any United States provisional application(s) listed below:

Application No.	Filing Date
60/182,751	02/16/00

I claim the benefit under Title 35, United States Code, Section 120 of any United States application(s) listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States application in the manner provided by the first paragraph of Title 35, United States Code, section 112, I acknowledge the duty to disclose material information as defined in Title 37, Code of Federal Regulations, section 1.56 which occurred between the filing date of the prior application and the national or PCT international filing date of this application:

Application No.	Date of Filing	Status
09/162,117	September 28, 1998	<u>X</u> Patented _ Pending _ Abandoned
08/977,845	November 25, 1997	_ Patented <u>X</u> Pending _ Abandoned
08/562,332	November 22, 1995	<u>X</u> Patented _ Pending _ Abandoned
09/041,934	March 13, 1998	_ Patented <u>X</u> Pending _ Abandoned
08/990,374	December 15, 1997	<u>X</u> Patented _ Pending _ Abandoned
08/485,219	June 7, 1995	<u>X</u> Patented _ Pending _ Abandoned
08/059,681	May 10, 1993	_ Patented <u>X</u> Pending <u>X</u> Abandoned

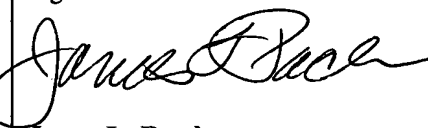

POWER OF ATTORNEY: As a named inventor, I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and transact all business in the Patent and Trademark Office connected therewith.

John T. Raffle, Reg. No. 38,585

Send Correspondence to: ArthroCare Corporation 595 N. Pastoria Avenue Sunnyvale, California 94085-2936	Direct Telephone Calls to: (Name, Reg. No., Telephone No.) Name: John T. Raffle Reg. No.: 38,585 Telephone: (408) 736-0224
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Full Name of Inventor 1	Last Name PACEK	First Name JAMES	Middle Name or Initial L.
Residence & Citizenship	City Coto De Caza	State/Foreign Country California	Country of Citizenship United States of America
Post Office Address	Post Office Address 25 Riviera	City Coto De Caza	State/Country Zip Code California 92679
Full Name of Inventor 2	Last Name THAPLIYAL	First Name HIRA	Middle Name or Initial V.
Residence & Citizenship	City Los Altos	State/Foreign Country California	Country of Citizenship United States of America
Post Office Address	Post Office Address 1192 Volti Lane	City Los Altos	State/Country Zip Code California 94024
Full Name of Inventor 3	Last Name EGGERS	First Name PHILIP	Middle Name or Initial E.
Residence & Citizenship	City Dublin	State/Foreign Country Ohio	Country of Citizenship United States of America
Post Office Address	Post Office Address 5366 Reserve Drive	City Dublin	State/Country Zip Code Ohio 43017

I further declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application or any patent issuing thereon.

Signature of Inventor 1  James L. Pacek	Signature of Inventor 2  Hira V. Thapliyal	Signature of Inventor 3 Philip E. Eggers
Date 1/17/01	Date 1-22-01	Date

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Signature of Inventor 1	Signature of Inventor 2	Signature of Inventor 3
James L. Pacek	Hira V. Thapliyal	Philip E. Eggers
Date	Date	Date January 19, 2001